19572

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Edi Processing Section

FORM D

SID 1 02000

Washington, DC

ข@ข

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL			
OMB Number: 3235-0076			
Expires:	April 30, 2008		
Estimated average burden hours per response 1			
SEC	USEONLY		
Prefix Serial			
DATE RECEIVED			

Filing Under (Check box(es	s) that apply):	[X]504	[]505	[X]506	[ ] Section 4(6)	[ ]ULOE
Type of Filing: [X] Nev	v Filing [ ]	Amendment			ħ	<b>PROCESS</b>
	A. BASI	C IDENTIFIC	ATION D	ATA		SEP 1 8 200
Commission of the Commission o	1. Enter the info	rmation reque	ested abo	ut the issu	er II	IOMSON REU
Name of Issuer [ ] (check i		dment and na	me has	changed, a	nd indicate chang	ge.)
Address of Executive Office Area Code): Lee County In						(Including
,	Telephone: 229		Paik Di	ive, Leesn	urg, GA	
31763; <sup>-</sup> Address of Principal Busine	Telephone: 229 ess Operations	-883-7050 (Number and	Street, C	City, State,		one
31763;  Address of Principal Busine Number (Including Area Co	Telephone: 229 ess Operations ode) (if different fo	-883-7050 (Number and rom Executive	Street, C	City, State,		one
,	Telephone: 229 ess Operations ode) (if different fi ess f Agricultural Pr	-883-7050 (Number and rom Executive	Street, C	City, State,		one
Address of Principal Busine Number (Including Area Co Brief Description of Busines Wholesale Distribution of Type of Business Organiza	relephone: 229 ess Operations ode) (if different finess f Agricultural Protein [ ] limited	-883-7050 (Number and rom Executive oducts.	Street, Ce Offices	City, State,		
Address of Principal Busine Number (Including Area Co Brief Description of Busine Wholesale Distribution of	relephone: 229 ess Operations ode) (if different finess f Agricultural Protein [ ] limited	-883-7050 (Number and rom Executive oducts.	Street, Ce Offices	City, State,	Zip Code) Teleph	
Address of Principal Busine Number (Including Area Co-Brief Description of Busines Wholesale Distribution of Type of Business Organiza [X] corporation	relephone: 229 ess Operations ode) (if different finess f Agricultural Protein [ ] limited	-883-7050 (Number and rom Executive oducts.	Street, Ce Offices	City, State,	Zip Code) Teleph	



### GENERAL INSTRUCTIONS Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of
    equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) t [ ] Promoter	hat Apply: [ ]Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last	name first) SEE ATT	ACHED LIST OF OF	FICERS AND	DIRECTORS
Business or Res	idence Address (Numb	er and Street, City, State,	Zip Code)	

# CHEM NUT, INC. - CONTINUATION SHEET - FORM D - ITEM A, SECTION 2

# Officers and Directors

# Office Held

Ricky H. Cook

422 Hickory Grove Road Leesburg, GA 31763 **Executive Officer** 

Davis, William Keith

P. O. Box 1087

Wauchula, FL 33873

Director

Dollar, II, Thomas H.

P. O. Box 68

Bainbridge, Georgia 31737

Director

Evans, Ralph G.

P. O. Box 1350

Douglas, Georgia 31534

Director

Fowler, Gregory S.

Lee County Industrial Park 800 Business Park Drive Leesburg, Georgia 31763 **Executive Officer** 

Heald, Fred

436 West Street

Naples, Florida 34108

Director

Lanier, L. Brinson

1769 Sunset View Ld

Metter, Georgia 30439

Liipfert, Jr., James C.

500 West Main Street

P.O. Box 202

Marshallville, Georgia 31057

Director

Director

# CHEM NUT, INC. - CONTINUATION SHEET - FORM D - ITEM A, SECTION 2

Officers and Directors	Office Held
Phillips, Jr., Leo L. 114 Ash Street Cochran, Georgia 31014	Director
Powell, Eddie L. 1202 TyTy Sparks Road Omega, Georgia 31775	Director
Powell, Jr., Jonathan S. 217 US 13N Windsor, North Carolina 27983	Director
Smith, Herbert L. 2300 Masters Court Albany, Georgia 31721	Executive Officer
Sumner, Gordon M. P.O. Box 809 Sylvester, Georgia 30791	Director
Sutton, Brett W. P.O. Box 1407 Lake Alfred, FL 33850	Director
Thomas, Keith B.	Executive Officer

1816 Lullwater Rd Albany, Georgia, 31707

#### **B. INFORMATION ABOUT OFFERING** Yes[X] No[ ] 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. \$10,000 2. What is the minimum investment that will be accepted from any individual? Yes [ ] No [X] Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) NONE Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [ ] All States (Check "All States" or check individual States) [CA] [DC] [FL] [GA] [HI] [ID] [AL] [AK] [AR] [CO] [CT] (DE) [AZ] [KY] [IL] [IN] [KS] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [IA] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SD] [VA] [WA] [WV][WI] [WY] [PR] [SC] [TN] [TX][UT] [VT]Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [ ] All States [FL] [GA] [ID] [AL] [AR] [CA] [CO] [CT] [DE] [DC] [HI] [AK] [AZ] (IL) [IN] [IA] [KS] (KY) [LA] (ME) [MD] [MA] [MI] [MN] [MS] [MO] [NC] [OH] [OK] [OR] [PA] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [ND] [WY] [PR] [RI] [SC] [TN] [TX][VA] [WA] [WV] [WI] [SD] [UT] [VT] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [ ] All States [IDI] [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI][MD] [MI] [MO] (IL) [IN] [IAI] [KS] [KY] [LA] (ME) [MA] [MN] [MS] [NC] [OK] [OR] [PA]

[NE]

[SC]

[NV]

[SD]

[NH]

[TN]

[NJ]

[TX]

[NM]

[UT]

[NY]

[VI]

[VA]

[ND]

[WA]

[OH]

[MV]

[WI]

[WY]

[PR]

[MT]

(RI)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security		ggregate ering Price	Ar	mount Already Sold
Debt	\$	-0-	\$	-0-
Equity	\$ 900	,000	\$	-0-
[X] Common [ ] Preferred				
Convertible Securities (including warrants)	\$	-0-	\$	-0-
Partnership Interests	\$	-0-	\$	-0-
Other (Specify).	\$	-0-	\$	-0-
Total	\$ 900	,000	\$	-0-

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number of Investors	
Accredited Investors	-0-	\$ -0- ·
Non-accredited Investors	-0-	\$ -0-
Total (for filings under Rule 504 only)	-0-	\$ -0-

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. N/A

Type of offering	Type of Security	Dollar Sold	Amount
Rule 505		_ \$	-0-
Regulation A		_ \$	-0-
Rule 504	Common Stock	\$	-0-
Total	Common Stock	\$	-0-

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

[]\$	-0-
[X]\$	300
[X]\$	5,000
[X]\$	1,000
[]\$	-0-
[]\$	-0-
[X]\$	2,700
[X]\$	9,000
	[X]\$ [X]\$ [X]\$ [ ]\$ [ ]\$ [X]\$

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." ............

\$ 891,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payme Officer	rs,	Davis	T-
	Directo Affiliate	•	_	ents To thers
Salaries and fees	[]\$	-0-	[]\$	-0-
Purchase of real estate	[]\$	-0-	[]\$	-0-
Purchase, rental or leasing and installation of machinery and equipment	[]\$	-0-	[]\$	-0-
Construction or leasing of plant buildings and facilities	[]\$	0-	[]\$	-0-
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	-0-	[]\$	-0-
Repayment of indebtedness	[]\$	-0-	[]\$	-0-
Working capital	[]\$	-0-	[X]\$ 8 <sup>e</sup>	91,000
Other (specify):	[]\$	-0-	[]\$	-0-
	[]\$	-0-	[]\$	-0-
Column Totals	[]\$	-0-	[X]\$ 8	91,000
Total Payments Listed (column totals added)		[X] \$ 8	391,000	

# D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
CHEM NUT, INC.		6/26/09
Name of Signer (Print or Type)	Title (Print or Type)	
KEITH B. THOMAS	CHIEF FINANCIAL OFFICER	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature )	Date
CHEM NUT, INC.	10/	9/28/08
Name of Signer (Print or Type)	Title (Print or Type)	
Keith B. Thomas	Chief Financial Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

			3 4						
1	2		3			4		Disquali	
			Type of security					under Sta	
	Intend to sell		and aggregate	, ,				(if yes, attach	
	to non-ac		offering price	Type of investor and amount purchased in State				explanation of waiver granted)	
	investors		offered in state						
	(Part B-Item 1)		(Part C-Item 1)	(Part C-Item 2)				(Part E-Item 1)	
				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
State	103	110		IIIVCSIOIS	1 mount	mvestors	7 HAOUAN	103	1.0
AL	X		\$50,000*	0	0	0	0		X
AK									
AZ									
AR	X		\$50,000*	0	0	0	0		X
CA									1
CO	X		\$50,000*	0	0	0	0		X
CT		<u> </u>					<u></u>		1
DE									
DC					}				<u> </u>
FL	X		\$50,000*	0	0	0	0		X
GA	X		\$50,000*	0	0	0	0		X
HI									1
ID	X		\$50,000*	0	0	0	0		X
IL	X		\$50,000*	0	0	0	0		X
IN									
IA	X		\$50,000*	0	0	0	0		X
KS	X		\$50,000*	0	0	0	0		X
KY	X		\$50,000*	0	0	0	0		X
LA	X		\$50,000*	0	0	0	0		X
ME									
MD	Х		\$50,000*	0	0	0	0		X
MA									
MI									
MN	X		\$50,000*	0	0	0	0		X
MS	X		\$50,000*	0	0	0	0		X
MO	X		\$50,000*	0	0	0	0		X

<sup>\*</sup>Common Stock

# APPENDIX

			3		5					
	2		,			4		Disquali		
			Type of security	of security					under State ULOE	
	Intend to sell and aggregate							(if yes, attach		
	to non-accredited		offering price	Type of investor and				explanation of		
	investors		offered in state (Part C-Item 1)	amount purchased in State (Part C-Item 2)				waiver granted) (Part E-Item 1)		
	(Part B-Item 1)		(ran C-nem 1)	Number of Number of				(1 and 12 - 10 m 1)		
				Accredited		Non-Accredited	•			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
MT										
NE	X		\$50,000*	0	0	0	0		X	
NV										
NH										
NJ										
NM	X		\$50,000*	0	0	0	0		X	
NY										
NC	Х		\$50,000*	0	0	0	0		X	
ND	Х		\$50,000*	0	0	0	0		X	
ОН										
OK	X		\$50,000*	0	0	0	0		X	
OR										
PA										
RI										
SC	Х		\$50,000*	0	0	0	0		X	
SD					1					
TN	Х		\$50,000*	0	0	0	0		X	
TX	X		\$40,000*	0	0	0	0		X	
UT										
VT										
VA	Х		\$50,000*	0	0	0	0		X	
WA										
wv										
WI	X		\$50,000*	0	0	0	0		X	
WY										
PR										

<sup>\*</sup>Common Stock

http://www.sec.gov/about/forms/secforms.htm Last update 06/2002

